

(Rev. 5/05)

**FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983**

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE**

(1) Debby TDuane Simpson 204291
 (Name of Plaintiff) (Inmate Number)

2555 S. Little Creek Rd. Dover, De. 19901
 (Complete Address with zip code)

= 05 - 741 =

(2) _____
 (Name of Plaintiff) (Inmate Number)

(Case Number)

(to be assigned by U.S. District Court)

(Complete Address with zip code)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)

vs.

CIVIL COMPLAINT

(1) State of Delaware,
 (2) Attorney General
 (3) U.S. Marshal (285 form)
 (Names of Defendants)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)



I. PREVIOUS LAWSUITS

- A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

N/A

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? • Yes • No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? • Yes • No
- C. If your answer to "B" is Yes:
 1. What steps did you take? Notified, Ron Blotzman, Consilor
Kemp. W Building. Habens Corpus, Appeal -320, 2004
 2. What was the result? Prothonotary; Lisa Bowman; says Aug 31, 2005
Superior Court Filed incorrectly; no notice to Attorney
modification General Office
Delaware
- D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS (in order listed on the caption)

(1) Name of first defendant: State of Delaware - Attorney General, Marshal Form Z85
 Employed as Attorney General at Clerk
 Mailing address with zip code: U.S. District Court; Lockwood 1B,
844 N. King Street; Wilmington, DE; 19801

(2) Name of second defendant: _____

Employed as _____ at _____

Mailing address with zip code: _____

(3) Name of third defendant: _____

Employed as _____ at _____

Mailing address with zip code: _____

(List any additional defendants, their employment, and addresses with zip codes, on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets of paper if necessary.)

1. C.R.A.N.O. UKC01-05-0391, on June 30, 2004
Probation revoked; No new charges, my Probation
WAS A "Plea-Bargain" PROBATION; signed Agreement,
Judge Vaughn; Superior Court, Released me on Probation;
ON Revocation, sentenced, two years [redacted] credit for my time
is Being [redacted] given, Prison Records; RV, 8-19-05,
Superior Court Commitment, shows [redacted] allowed
credit for time served, should have been released
Aug 1, 2005. Request Payment state; DELAWARE,
for false imprisonment; usual Rate \$250/day.
3. _____

V. RELIEF

(State briefly exactly what you want the Court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. USUAL RATE, \$250/day, TO RELIEF; [redacted]
short, (No Probation), NO court costs.

2.

3.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 19 day of Oct, 2005.

DeLLAeT S. Sampson
(Signature of Plaintiff 1)

(Signature of Plaintiff 2)

(Signature of Plaintiff 3)

I/M Delebert Sampson
SBI# 204291 UNIT 11-C-18
DELAWARE CORRECTIONAL CENTER
1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977



Clerk
U.S. District Court
Lock Box 18
844 N. King Street
Wilmington, De, 19801

1351473533 *[Handwritten signature]*